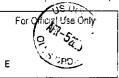
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Exp:res 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U -

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From

17029	1 /01 /05 Through 12/31 /05		
3. Name and address of person filing	4 Name file number and address of labor organization.		
Name Joshua P. Becliett Comoye Sports Associates	Name major leasue Baseball Playe io ASS Ociation LMLBA Labor Organization F le Number		
PO Box. Bldg Room No. if any Suite 302	P O Box Building and Room Number, if any		
Street 5400 Laurel Springs Pruy	Street 125. Light Street		
City Suwaree	City New YERK		
State 6A .:IP Code + 4 30024	State ~ ZIP Code + 4 100 17		
5. Position ir labor organization Player Representative			
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):			
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.			
6. Name and accress of Employer (including trade name if any)	7 a. Nature of Interest Transaction or Income.		
Name			
Trade Name if any			
P.O. Box, B.og., Room No., if any			
	7.b. Amount		
Street			
City			
State ZJP Code + 4			
Signature'			
15. Signature and verification. The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)			

Signed

On 3/10/0: 10780833707
Date Telephone Number

Name of Person Filing Tothua P. Beelle	File Number U- 17029	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to, or otherwise dealing with the business of an employed whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name if any).  Name Peer Styloox 1 Atomatical  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Stell 300  Street 11 70 Perstell 3  City MT. Lawres  State NT ZIP Code + 4 08054  10. If 9.b. or 9.c. is checked give trust or employer's name  Name	9. Business deals with  a. Labor Organization  b. Trust  c. Employer  11.a. Nature of such dealing.	
Trade Name, if any: P.O. Box, Bldg., Room No. (f any Street	11.b. Approximate dollar value of such dealing.	
State ZIP Code + 4	Payments for autowaphing baryshall cares	
	12.b. Amount. \$10,500.00	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any  P.O. Box, Bldg , Room No., if any	14.a. Nature of payment.	
,		
Street		

14.b. Amount of payment

ZIP Code + 4

or Consultant

?

13.b. Is the Business an Employer

State

Name of Person Filing 505hua ? Bee	kett File Number U- 17029	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name. f any).  Name The Upper Decile Company.  Trade Name, if any:  P.O. Box, Bldg, Room No., if any.  Street 5909 Sea Other Place.	9. Business deals with  a. Labor Organization  b. Trust  c. Employer	
City Calsbas.  State CA ZIP Cod3+4 92008-1	ldozi	
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg : Room No., if any	11.a. Nature of such dealing.  MUSPALICENSEL	
Street  City  State  ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$4,172909.11  12.a. Nature of interest held or income received.  Paymen's tex autographing baselse us conds	
C. Received from any employer (other than an employer covered or from any labor relations consultant to an employer any payment of r	d under parts A and B above) money or other thing of value.	
Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any	14.a. Nature of payment.	

14.b. Amount of payment.

Street

City

State

P.O. Box, Bldg., Room No., if any

13.b. Is the Business an Employer

ZIP Code + 4

or Consultant

?

## FORM LM-30

## ADDENDUM FOR JOSHUA P. BECKETT

In 2005, I received endorsement income from three (3) businesses that, insofar as I know, do not do business with the MLBPA, but that may do business with one or more Major League Baseball Clubs and/or with Major League Baseball. I do not know whether any of these businesses have such extensive commercial dealings with the clubs and/or with Major League Baseball that those commercial dealings represent a 'substantial part' of their overall business operations. Accordingly, in a good faith effort to fully meet (and perhaps go beyond) my reporting obligation, I am stating below the endorsement income I received from each of these businesses in 2005:

Company:	Amount Received:	
Elite Sports Management	\$1.401.00	Payment for autographing baseballs
Reebok International, LTD 1895 J.W. Foster Boulevard	\$50.000.00	Annual Fee/Award Bonuses
Canton, MA 02021	\$30,000.00	Merchandise Credit
Wilson Sporting Goods	\$10,000.00	Annual Fee
8700 W. Bryn Mawr Ave. Chicago, 1L 60631	\$10,000.00	Merchandise Credit